

**AFFIDAVIT OF REBUILT OR  
REPAIRED SALVAGE VEHICLE**



**SECRETARY OF STATE  
BUREAU OF MOTOR VEHICLES  
VEHICLE SERVICES - TITLE SECTION**

<b>Final Vehicle Owner</b>					
Name: _____			Vehicle Make: _____		
Address: _____			Vehicle Model: _____		
City: _____		VIN: _____			
State: _____	ZIP _____	Phone: (____) _____	CTA#: _____	R _____	

**Instructions for Part A:** Use **Part A** to list parts used in the repair of the salvage vehicle. In the “KEY” section beside each part listed indicate whether the component was replaced with a new part (N), or a used part (U), or if the part was repaired (R) instead of replaced. *Bills of sale for new components must accompany this form.* For used parts list VIN and title information below.

KEY N/U/R	PART	L-Left R-Right	VIN	TITLE STATE	TITLE NUMBER	DATE SURRENDERED
	FENDER					
	FRONT DOOR					
	REAR DOOR					
	QUARTER					
	AIRBAG (S)	Serial Number(s) for each new airbag				
	AIRBAG (S)	Record VIN if used airbag				
	COMPLETE FRONT CLIP	If a full clip is used, record VIN				
	COMPLETE REAR CLIP	If a full clip is used, record VIN				
	ROOF					
	HOOD					
	TAILGATE/HB/LID					
	CARGO BED					
	FRAME					
	ENGINE					
	TRANSMISSION					
	TRANSFER CASE					
	FRONT FORK (MC)					
	CRANKCASE (MC)					

☐ **No repairs made. (Please explain):** \_\_\_\_\_

Date: \_\_\_\_\_ Repairer's signature: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

I, the above signed, under penalties of false statement do certify the information in Part A is true and correct to the best of my knowledge.

*101 Hospital Street, #29 State House Station, Augusta, ME 04333-0029 Tel. (207) 624-9000 Ext. 52138 FAX: 624-9254 TTY: 877-456-8195*

**DISPOSITION OF SALVAGE VEHICLE****SECRETARY OF STATE  
BUREAU OF MOTOR VEHICLES  
VEHICLE SERVICES - TITLE SECTION****PART B**

**NOTICE:** You **must** surrender the title of a salvage vehicle to the Maine Bureau of Motor Vehicles as soon as you remove any component part as listed in Part A of the reverse of this form, or as soon as a salvage vehicle is scrapped, compressed or destroyed, even if the title is from another state.

**INSTRUCTIONS:** Use Part B to inform the Secretary of State that a salvage vehicle has been scrapped, dismantled, compressed or destroyed. (If the salvage vehicle has been rebuilt use Part A on the reverse of this form.) A salvage vehicle is any vehicle for which an insurance company has made a total loss payoff or which an owner declares is only useful for parts.

**PERSON OR COMPANY SURRENDERING TITLE (S)**

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TITLES SURRENDERED**

<b>TITLE NUMBER</b>	<b>STATE</b>	<b>VIN</b>

Under penalties of false statement, I, the undersigned, certify that the vehicles described in the attached certificates of title were scrapped, dismantled, compressed or destroyed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Note:** Make sure your name is on the back of every surrendered title or on a transfer form attached to the title.